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| Examiner Initial*  | Document Number         | Date           | Name    | Class                           | Subclass   | Filing Date If Appropriate |    |
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|  |                         |                |         |                                 |            | Yes                        | No |
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| *Examiner: Initial if citation considered, whether or not citation is in conformance with MPEP 609; Draw line through citation if not in conformance and not considered. Include copy of this form with next communication to applicant. |                         |                |         |                                 |            |                            |    |